



Application No. (if known): 09/776,311

Attorney Docket No.: 55583(72012)

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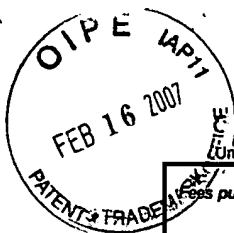
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One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Fee Transmittal (1 page)
Request for Continued Examination Transmittal (1 page)
Amendment dated 1.16.2007 (10 pages)
Charge \$910.00 to deposit account 04-1105



PTO/SB/17 (01-06)

OMB 0851-0032

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FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	09/776,311-Conf. #6714
		Filing Date	February 2, 2001
		First Named Inventor	Naofumi Ueda
		Examiner Name	K. Y. Poon
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2625	
TOTAL AMOUNT OF PAYMENT	(\$) 910.00	Attorney Docket No.	55583(72012)

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
24	-24 = 0	x	=	Fee (\$) Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
9	-9 = 0	x	=	
HP = highest number of independent claims paid for, if greater than 3.				

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____ /50 _____ (round up to a whole number) x	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

1801 Request for Continued Examination	790.00
1251 Extension for response within first month	120.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	42,693
Name (Print/Type)	Steven M. Jensen	Telephone	(617) 439-4444
		Date	February 14, 2007